

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Nov-24

System Name: Lake Selmac - Osprey ID#: 41 WTP ID: 90186 TP-

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]
1	50	40	10	20	0.081	0.081
2	50	40	10	20	0.091	0.091
3	50	40	10	20	0.087	0.087
4	50	40	10	20	0.092	0.092
5	55	40	15	20	0.114	0.114
6	55	40	15	20	0.132	0.132
7	55	40	15	20	0.115	0.115
8	55	40	15	20	0.112	0.112
9	55	40	15	20	0.114	0.114
10	55	40	15	20	0.116	0.116
11	55	40	15	20	0.091	0.091
12	40	40	0	20	0.101	0.101
13	40	40	0	20	0.091	0.091
14	40	40	0	20	0.104	0.104
15	40	40	0	20	0.098	0.098
16	40	40	0	20	0.084	0.084
17	40	40	0	20	0.099	0.099
18	40	40	0	20	0.049	0.049
19	40	40	0	20	0.149	0.149
20	45	40	5	20	0.142	0.142
21		40		20		
22		40		20		
23		40		20		
24		40		20		
25		40		20		
26		40		20		
27	45	40	5	20	0.166	0.166
28	45	40	5	20	0.117	0.117
29	45	40	5	20	0.119	0.119
30	45	40	5	20	0.154	0.154
31		40		20		

Cartridge & Bag Filtration			
95% of daily turbidity readings ≤ 1 NTU?	Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes	YES	YES

Notes: PSI = pounds per square inch
PSID = pounds per square inch difference (before filter - after filter)
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME:	
SIGNATURE:	DATE:
PHONE #: ()	CERT #: 2379

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP-: 90186

System Name:	Lake Selmac - Osprey	ID#: 41	Month/Year:	Nov-24	Disinfection Giardia Log Inactiv:	1
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.8	40	72.0	12.0	7.4	42.6	YES	0.694444
2	1.7	40	68.0	12.0	7.4	42.1	YES	0.69444
3	1.7	40	68.0	12.0	7.6	45.2	YES	0.614583
4	1.7	40	68.0	11.0	7.4	45.0	YES	0.61458
5	1.7	40	68.0	12.0	7.6	45.2	YES	0.597222
6	1.7	40	68.0	12.0	7.6	45.2	YES	0.59722
7	1.8	40	72.0	10.0	7.4	48.6	YES	0.795139
8	1.8	40	72.0	10.0	7.4	48.6	YES	0.79514
9	1.9	40	76.0	10.0	7.3	47.4	YES	0.482639
10	1.9	40	76.0	10.0	7.3	47.4	YES	0.48264
11	2.0	40	80.0	10.0	7.6	53.4	YES	0.767361
12	2.2	40	88.0	11.0	7.8	54.9	YES	0.76736
13	2.3	40	92.0	11.0	7.7	53.6	YES	0.65625
14	2.4	40	96.0	11.0	7.6	52.3	YES	0.65625
15	2.5	40	100.0	11.0	7.6	52.9	YES	0.84375
16	2.6	40	104.0	11.0	7.6	53.5	YES	0.84375
17	2.7	40	108.0	11.0	7.6	54.1	YES	0.84375
18	2.5	40	100.0	10.0	7.5	54.6	YES	0.740741
19	2.3	40	92.0	10.0	7.4	51.5	YES	0.74074
20	2.5	40	100.0	10.0	7.5	54.6	YES	0.09375
21		40						0.09375
22		40						0.038194
23		40						0.03819
24		40						0.114583
25		40						0.11458
26		40						0.11458
27	2.0	40	80.0	10.0	7.3	48.0	YES	0.094907
28	2.1	40	84.0	10.0	7.3	48.5	YES	0.09491
29	2.1	40	84.0	9.0	7.3	51.9	YES	0.09491
30	2.1	40	84.0	9.0	7.2	50.1	YES	0.09491
31		40						0.546875

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350